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ABSTRACT

Representatives of 47 federal, state, local, and tribal agencies and about 280 participants attended the May 4-5, 1977, series of presentations and workshops co-sponsored by the Bureau of Indian Affairs and the New Mexico Commission on the Status of Women. Designed to acquaint residents of the San Juan Basin with social service workers, the conference attempted to clarify needs, problems, and concerns of domestic violence victims, attempted to formulate recommendations aimed at developing responsive services, and coordinate existing resources for such victims. Speakers addressed child neglect and abuse, and woman abuse, which follow similar patterns of self-perpetuation. It was felt that few agencies at any level are equipped to handle woman abuse, and that key problem areas in which change is necessary are research, social policy, emergency services, and the criminal justice system. Workshop participants formulated detailed recommendations for prevention services, emergency and social services, the criminal justice system, and tribal needs. Participants agreed that in the San Juan Basin, there is considerable interest in and support for an organized, systematic, and effective response to problems of domestic violence; residents are looking to their leaders and officials for aid and support in this area because, untreated, domestic violence can only spread. (SB)

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REPORT ON

BATTERED WOMEN
AND
CHILDREN CONFERENCE

SHIPROCK, NEW MEXICO
MAY 5 & 6, 1977

SPONSORED BY:
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Introduction

In response to a request from two Navajo women in Shiprock N.M.C.S.W. helped organize and present a two-day conference on Battered Women and Children. The conference, aimed at the entire San Juan Basin area, was held on May 5 and 6, at the Shiprock Chapter House. Co-sponsored by the Bureau of Indian Affairs, the conference consisted of presentations by national experts on domestic violence and a panel of local, state, federal and tribal officials. The objectives of the conferernce were to:

1. Bring local residents and agency personnel together to identify services and procedures for addressing problems related to domestic violence;
2. Identify the national and local needs of victims of domestic violence and;
3. Stimulate the coordination of existing resources, while identifying gaps in service for domestic violence victims.

The conference was attended by 217 registered participants and an estimated 60 unregistered people. Following the formal presentation, attendees had an opportunity to meet in workshops with representatives of social services, mental and physical health, law enforcement and prosecution, and emergency and special services. The workshops were designed to acquaint local residents of the San Juan Basin with social service workers, to clarify problems and concerns, and to generate recomendations aimed at aiding state and local planners in the development of responsive services.

Over 47 agencies were represented, including federal, state, local and tribal offices. Attendees at the conference came from around the state representing Farmington, Shiprock, Paquate, Laguna, Oak Springs, Cove, Santa Clara, Kirtland, Newcomb, Mesaview, Albuquerque, Teec Nos Pos (Arizona) and Redrock (Arizona).

Content Summary

Dr. James Weston, Chief Medical Investigator for New Mexico, opened the conference with an address on child abuse. In his presentation, Dr. Weston indicated that the abuse and neglect of children occurs at all social and economic levels of society. According to Weston there has been a dramatic increase in the number of child deaths in New Mexico in the past six months. A more pervasive problem exists in the area of child neglect. Emotional neglect is found more often in upper or middle income families, where a greater emphasis in placed on materialism, while physical neglect is found more often in lower economic groups.

Weston stated that emotionally neglected children may have an abundance of possessions and good clothes, and are usually well fed. However, their parents may be unable to spend time with them and as a result they experience feelings of isolation and neglect which can result in serve psychological problems ranging from acting-out behavior, withdrawal, and even a failure to assimilate food.

Emotional and physical neglect and abuse are generally outgrowths of a parent's emotional insecurity and feelings of social isolation. Dr. Weston pointed out that parents with depressed self concepts and insufficient ego strength are often unable to provide their children with the security they need. The resulting pattern of neglect or abuse is self perpetuating. Abused or neglected children, Weston pointed out, are more likely to act the same way towards their own children. Children that are habitually harmful to others often come from backgrounds of abuse or neglect.

In most instances, Weston indicated, child abuse is triggered by a specific incident or event. Exasperated parents, losing their tempers may inflict harm unintentionally on their child. The need for some form of release nechanism for these people is apparent.

Following Dr. Weston's presentation, representatives fro
various local agencies addressed problems associated with chi
and woman abuse. Included among the difficulties in seeking
gal solutions to problems of domestic violence were:

1. The legal requirement to prove intentional battering of a child.
2. A high rate of charges being dropped by victims of woman abuse, preventing the majority of such cases from ever reaching the courtroom.
3. The loss of financial support of the family if a wage-earning battering spouse is jailed and/o heavily fined.
4. Laws which restrict police officers from making an arrest unless the officer is a witness to simple assault.
5. Reluctance on the part of many women to file a complaint and to press char_es against their husband.

Dr. Shirley Hill Witt, Executive Director of the Rocky M
ain Regional Office of the U.S. Commission on Civil Rights, p
sented the results of a survey conducted by her office on wom
buse. According to Dr. Witt's survey, woman abuse is only ju
ing recognized as a problem. Few statistics exist which accu
reflect the degree or nature of woman abuse. What informatic
available is largely buried in law enforcement, prosecution,
service and medical records under a variety of headings.

According to Dr. Witt, surveys conducted in major popula
centers around the country indicate that woman abuse occurs i
many as 50% of all families. While figures obtained are high
ities agree that they are not an accurate representation of t
blem. Some groups of battered women, such as upper and middl
people, are reluctant to report abuse because of its potentia
on their family's economic and social standing. Available da
woman abuse, however, suggests a pattern similar to that fou
child abuse surveys. Woman battering appears to occur in al
of the population, with a surprisingly frequent occurrence a

enforcement officers, physicians and service professionals.

Few existing federal, tribal, state and local agencies are equipped to handle woman abuse. Complicating situational problems such as the presence of children, lack of financial resources, reluctance on the part of families to become involved, and hesitant police, contribute greatly to the abused woman's inability to escape her situation.

Dr. Witt identified several key problem areas where significant change is necessary: research, social policy, emergency services and the criminal justice system.

Research: Adequate knowledge about woman abuse, its extent and nature and the nature of the victim and the offender is currently lacking. Frequency data, procedures for handling woman abuse, and an understanding of both the victim and the offender are not currently available to aid planners in determining programs or revising procedures.

Social Policy: Social and cultural norms tolerating, condoning or encouraging violence, especially against women and children, have contributed greatly to the "hidden" nature of domestic violence. The absence of preventive approaches, myths which hinder recognition of domestic violence, stereotypes of women, failure to prepare people adequately for the parent role, neglect by the general community, fear of reprisal, and lack of public awareness were but a few of the problems cited which impede the development of responsive programming and services to families under stress.

Emergency Care: The victims of domestic violence are often in need of a range of medical, legal and social services, each of which has its own unique perspective. Some aid, usually slow in coming, is available provided the family has additional problems which qualify

them for a particular agency's services. (Domestic violence often becomes secondary to other problems such as unemployment, alcoholism, financial distress, psycholgical distress, or chronic medical problems.) A lack of specialized emergency services, insufficient interagency cooperation and coordination to effectively mobilize resources, and inadequate definition and understanding of domestic violence as a social problem were cited as the major obstacles to providing emergency care through existing agencies and organizations.

Criminal Justice: A number of circumstances were identified which work against the victim of domestic violence. The courts and law enforcement branches of the criminal justice system are reluctant to became involved in intrafamily problems. Family violence is one of the most dangerous situations to a police officer, and involvement by law enforcement officers frequently intensifys the situation rather than reduces the violence.

In simple assault situations, an officer must actually witness the attack in order to make an arrest. While the family remains united, legal solutions such as imprisonment or fines harm the entire family, contributing to an already difficult and perhaps unstable situation. The absence of legislation to cover such crimes as rape by a spouse, further contributes to the difficulty of achieving a legal remedy.

Also cited as contributing factors to an unresponsive criminal justice approach were the high incidence of complaints withdrawn by victims, and judges who do not view domestic violence seriously.

While many other problems were cited which contribute to or maintain a high frequency of domestic violence, conference participants generally felt that addressing these problems would do much to reduce the incidence of violence and enhance the availablity of

service to victims.

Recommendations:

Following the presentations, participants broke up into workshops to discuss problems and needs in depth. Below is a list of recommendations produced by those workshops to address the problem of domestic violence.

Prevention Services:

Domestic violence is a progressive problem, passing from one generation to the next. In addition, a variety of social and cultural practices exist which support or encourage the occurrence of domestic violence. The following recommendations were made. In order to prevent domestic violence:

1. Increase the availability of mental health and self-concept development, services available to the general public, prior to the emergence of personal and social dysfunctions.

All people experience some degree of stress and frustration, yet few individuals learn how to manage these feelings until after they have encountered an extreme or severe difficulty. Conference participants felt that services designed to stregthen individual coping skills, improve parenting techniques, and encourage personal growth and development should be made more readily available to the general public prior to the onset of a severe emotional or behavioral problem.

2. Additional research locally and with respect to the various New Mexico cultures to better understand the scope and nature of the domestic violence problem is needed. Research aimed at understanding the development and underlying dynamics of violent behavior should also be undertaken.

3. Develop mental health service networks which can provide

crisis intervention and support services to individuals and families under stress prior to the emergence of severe dysfunction.

Many communities around the state do not have an effective crisis intervention program to provide meaningful, short term, emergency help to victims of stress. In addition the present treatment and service philosophy of the State emphasizes rehabilitation and reintegration of individuals and families whose lives have been disrupted. Conference participants acknowledged that many people will require continuous supportive services while residing in a community. Support networks, designed to respond to people undergoing normal stress, will be increasingly needed as life becomes more complex and demanding.

4. Increase public education on the nature of family life, with an emphasis on parenting, child development, and relationship-building.

5. Provide consciousness raising experiences for women and men to examine current attitudes and behavior patterns associated with sex role stereotyping, and explore more positive alternatives.

6. Develop adequate recreation facilities for youth and families and provide respite services to parents in need of, but unable to obtain a minimal amount of time out of the home.

7. Increase the opportunity for contact between families and the agencies which serve them. Include families in the development and provision of social services, and establish mechanisms through which families and community members can provide input to social service planners and organizations.

8. Provide a coordination mechanism through which community support and service agencies, such as schools and churches, can strengthen their effectiveness, and augment professional mental health and social service efforts.

9. Increase the emphasis on social responsibility, especially in programs affecting the young, and intensify responses to the unmet spiritual and philosphical needs of youth.

Emergency and Social Services:

A substantial number of conference participants indicated that a major factor in perpetuating domestic violence is the lack of alternatives available to victims. Oftentimes, the victim of household violence is lacking in funds, support and the psychological strength necessary to escape the situation. Among the specific requirements of victims of domestic violence were:

1. Develop a central registry to identify target families in distress as an aid to the mobilization of preventive, protective and treatment resources.

2. Develop a wider range of in-family intervention and crisis strategies which de-emphasize the negative and self depreciating aspects of being unable to cope effectively, while identifing and reinforcing inherent strengths in the family.

3. Establish a 24 hour crisis intervention shelter care service to provide a full range of short term emergency services including protective services, medical care, crisis intervention, counseling, advocacy, referral and follow-up.

4. Provide community-based and supported respite and homemakers' services to relieve intrafamily tensions and reduce the stress which leads to episodic outbursts of family violence.

5. Establish an elementary school social work program as part of an expanded case-finding and early intervention network.

6. Insure closer coordination and cooperation between emergency, medical, social service, law enforcement, mental health, and judicial resource agencies to improve the quality of available service, and provide the level of care suited to individual or family needs.

Criminal Justice System:

The majority of conference attendants indicated a need for legal and physical protection. To obtain those services, participants made the following recommendations:

1. Expand and improve education and training programs for law enforcement, emphasizing alternative protective intervention strategies and defusing techniques.

2. Strengthen law enforcement procedures to insure prompt and effective responses to domestic disturbance calls.

3. Revise and up-grade existing protective legislation to expand and strengthen protective services to adults and children.

4. Develop and enforce mandatory adult and child abuse reporting legislation which provides stiffer penalties for failure to report by professionals.

5. Develop specific legislation aimed at protective and prosecutorial recourse for female victims of household violence.

6. Explore and develop alternatives to the present system of judicial involvement in family disturbances, with an emphasis on chronic reports and multiple problem families.

7. Recognize that a substantial segment of the population engaged in criminal behavior is in need of comprehensive social, psychological, and rehabilitation services as an alternative to more traditional criminal justice responses, and provide that range of service needed by this group.

8. Expand the judical process as it is applied to family disturbances to include consideration of and responsiveness to cause motivations and situations which impact on intra-family violence.

Tribal:

Many of the recommendations appearing above are applicable (some with modification) to tribal needs and institutions. However, two areas were cited specifically pertaining to tribal policies and practices.

1. Improve cooperation and coordination within and between federal and state agencies to reduce duplication of services, and fill existing service gaps.

2. Include in the tribal code provisions outlining the rights of children and women, and provide an effective mechanism for the enforcement and protection of those rights.

Conclusion

Considerable interest in and support for an organized, systematic and effective response to the problem of intrafamily violence exists in the San Juan Basin. Residents of the area are looking towards their leaders and officials for assistance and support in responding to this emerging need. Untreated, domestic violence can only spread, leaving in its wake disturbed lives and wasted human resources at a time when few communities can afford the social costs.